

CLAIMS ONLY							Application Number 19/891033		Filing Date		
							Applicant(s)				
							* May be used for additional claims or amendments				
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT						
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	
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Total Indep			3				Total Indep				
Total Depend			16				Total Depend				
Total Claims			19				Total Claims				